| | errent total | Effecti CLAIMS AS | <u> </u> | PART I | | 1,771 1 11 1111 1 1 1 1 1 1 1 1 1 1 1 1 1 | 10,6 | <u>38</u> | OTHER | THAN! |
|-----------------------------------|---------------------------------------|--------------------------|-----------------------------------|------------------------|---------------------------|--|-----------------|-----------|---------------------|-----------------|
| | A CANA | CLAIIVIS AS | (Column | | mn 2) | SMALL E | | ÓR | SMALL | |
| 0 | TAL CLAIMS | | 56 | | | RATE | FEE. | . , | RATE | FEE |
| ֝֝֝֝֝֝֝֝֝֝֝֝֝֝֝֝֝֟֝֝ ֡ | R | ., . | NUMBER F | ILED, NUMB | ER EXTRA | BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
|) | TAL CHARGEAE | BLE CLAIMS. | 56 min | us 20= * · · · (| 36 | X\$ 9= | · , : : | OR | X\$18= | |
| | EPENDENT CL | AIMS : | Ú mir | nus 3 = | 1 | X42= | | OR | · X84= | . : |
| J | LTIPLE DEPEN | DENT CLAIM PF | RESENT | • | · 🗆 · | .140- | | | +280= | |
| | the difference i | n column 1 is l | less than ze | ro, enter "0" in o | column 2 | +140= | | OR | | , |
| • | · · · · · · · · · · · · · · · · · · · | | • | | | : ' TOTAL | | OR | TOTAL OTHER | THAN |
| | | _AIMS AS A (Column 1) | | (Column 2) | (Column 3) | SMALL | ENTITY | OR | | |
| | | CLAIMS . REMAINING. | | HIGHEST NUMBER | PRESENT | : RATE | ADDI- TIONAL | . , | RATE: | ADDI- TIONAL |
| | | AFTER ' | | PREVIOUSLY: PAID FOR | EXTRA | HAIE | FEE | : | TOTIL | FEE |
| | Total | . 59 | Minus · | -56 | =3 | X\$ 9= | • : : | OR | X\$18= | |
| | Independents | 4 | Minus 🤌 | (m. 1. 2/1.) | 1-0 | X42= | | OR | X84= | |
| | FIRST PRESE | NTATION OF MU | JLTIPLE DEF | PENDENT CLAIM | ··· ··· · | +140= | | OR | . +280= | |
| | | · · · · · | | | eli en de eli en en en | TOTAL | | | · TOTAL | |
| | | (Column 4) | ٠. | (Column 2) : | (Column 3) | ADDIT. FEE | | OR | ADDIT. FEE | |
| | | (Column 1) . CLAIMS | | . HIGHEST | | | ADDI- | . , | | ADDI- |
| | | REMAINING AFTER | | PREVIOUSLY PAID FOR | PRESENT : | RATE | TIONAL FEE | | RATE | TIONAL FEE |
| | Total | * | Minus | ** | | X\$ 9= | 1 :: | OR | X\$18= | 1,55 |
| | Independent | * | Minus | *** | = | X42= | | | X84= | |
| | FIRST PRESE | NTATION OF MU | JLTIPLE DEF | PENDENT CLAIM | | A42= | | OR | | |
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| • | · - • | · - 2 | | | | ADDIT. FEE | | OR | TOTAL ADDIT, FEE | |
| | | (Column 1) | free balance and the same and the | (Column 2) | (Column 3) | | | 10 | | |
| | | CLAIMS REMAINING | | HIGHEST NUMBER | PRESENT | RATE | ADDI- TIONAL | | RATE | ADDI- TIONAL |
| | | AFTER AMENDMENT | | PREVIOUSLY PAID FOR | EXTRA | TAIL | FEE | | I TAIL | FEE |
| | Total | t | Minus | ** | = | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | - | X42= | | OR | X84= | |
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| _ | | | | | | # TI4U= | 1 | OR | 1 | 1 |
| • | | | | ımn 2, write "0" in c | | TOTAL | | OR | TOTAL | |

Application or Docket Number

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IN THE HULTED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

WIDEGREN et al.

Serial No. 10/038,770

Filed: January 8, 2002

Title:

Atty Dkt. 4009-25

C# M#

2141 TC/A.U.

· Examiner: Patel, Chirag R.

Date: January 23, 2006

METHOD AND APPARATUS FOR COORDINATING END-TO-END QUALITY OF SERVICE REQUIREMENTS FOR MEDIA FLOWS IN A MULTIMEDIA SESSION

JAN 2 8 2006

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

RESPONSE/AMENDMENT/LETTER

| incorporated by reference and the signature below serves as the signature to the attachment in the absence signature thereon. | of ar | ny other |
|--|--------|----------|
| ☐ Correspondence Address Indication Form Attached. | | |
| Fees are attached as calculated below: Total effective claims after amendment 59 minus highest number previously paid for 56 (at least 20) = 3 x \$50.00 \$150.00 (1202)/\$75.00 (2202) |) \$ | 150.00 |
| Independent claims after amendment 4 minus highest number previously paid for 4 (at least 3) = 0 x \$200.00 \$0.00 (1201)/\$0.00 (2201) |) \$ | |
| If proper multiple dependent claims now added for first time, (ignore improper); add \$360.00 (1203)/\$180.00 (2203 |) \$ | |
| Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s) One Month Extension \$120.00 (1251)/\$60.00 (2251) Two Month Extensions \$450.00 (1252)/\$225.00 (2252) Three Month Extensions \$1020.00 (1253/\$510.00 (2253) Four Month Extensions \$1590.00 (1254/\$795.00 (2254) Five Month Extensions \$2160.00 (1255/\$1080.00 (2255) |)) | |
| Terminal disclaimer enclosed, add \$130.00 (1814)/ \$65.00 (2814) | \$ | |
| Applicant claims "small entity" status. Statement filed herewith | | |
| Rule 56 Information Disclosure Statement Filing Fee \$180.00 (1806) | \$ | |
| Assignment Recording Fee \$40.00 (8021) | \$ | |
| Öther: | \$ | |

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

TOTAL FEE ENCLOSED \$ 150.00

901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000

Facsimile: (703) 816-4100

JRL:sd

NIXON & VANDERHYE P.C.

By Atty: John R. Lastova, Reg. No. 33,149

Signature:

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